

Attorney's Docket No.: 16793-002001

OFFICIAL COMMUNICATION FACSIMILE:

OFFICIAL FAX NO: (703) 872-9306

Number of pages including this page **7**

RECEIVED
CENTRAL FAX CENTER

MAY 23 2005

Applicant : Colin Waters et al.
Serial No. : 10/715,884
Filed : November 17, 2003

Art Unit : 2833
Examiner : Tho D. Ta

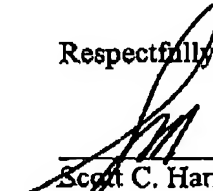
Title : Connector and Cross Voltage Protector for Entertainment Lighting

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attached to this facsimile communication cover sheet is an Amendment in response to 02/23/05 final Office action, faxed this 23rd day of May, 2005, to the United States Patent and Trademark Office.

Respectfully submitted,

Date: May 23, 2005



Scott C. Harris
Reg. No. 32,030

Fish & Richardson P.C.
PTO Customer No. 20985
12390 El Camino Real
San Diego, California 92130
Telephone: (858) 678-5070
Fax: (858) 678-5099

10517318.doc

NOTE: This facsimile is intended for the addressee only and may contain privileged or confidential information. If you have received this facsimile in error, please immediately call us collect at (858) 678-5070 to arrange for its return. Thank you.

Attorney's Docket No.: 16793-002001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Colin Waters et al. Art Unit: 2833
Serial No.: 10/715,884 Examiner: Tho D. Ta
Filed : November 17, 2003
Title : CONNECTOR AND CROSS VOLTAGE PROTECTOR FOR
ENTERTAINMENT LIGHTING

VIA FACSIMILE

Mail Stop Final
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
CENTRAL FAX CENTER

MAY 23 2005

AMENDMENT

In response to the Office action mailed February 23, 2005,
please amend the application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is
being transmitted by facsimile to the Patent and
Trademark Office on the date indicated below.

May 23, 2005
Date of Transmission
Signature

Carroll Allman
Typed or Printed Name of Person Signing
Certificate